

Summary of Safety and Effectiveness

Sponsor:	aap Implantate AG Lorenzweg 5 D-12099 Berlin Germany	NOV 19 2012
Company Contact:	Dipl.-Ing. Marc Seegers Phone: +49-30-750-19 -192 Fax: +49-30-750-19 - 111	
Date	May 9, 2012	
Trade Name:	aap LOQTEQ® Distal Lateral Femur Plate 4.5 System	
Common Name:	Distal Lateral Femur Plate	
Classification Name and Reference:	21 CFR 888.3030 Single/multiple component metallic bone fixation appliances and accessories – Class II and 21 CFR 888.3040 Smooth or threaded metallic bone fixation fastener - Class II	
Device Product Code and Panel Code:	Orthopedics/87/ HRS: Plate, Fixation, Bone Orthopedics/87/ HWC: Screw, Fixation, Bone	
Predicate device:	LCP® Distal Femur Plates of Synthes (USA) with premarket notification no. K062564 (OCT 19, 2006).	
Device Description:	<p>Bone plates and screws are used for fixation of bone fragments, i.e., for treatment of bone fractures and other bone injuries. Bone plates are fixed by the use of bone screws. Bone plates and bone screws are implants. If the plates are used in conjunction with locking screws, a so called internal fixator will be realized (internal fixation).</p> <p>The LOQTEQ® Distal Lateral Femur Plate 4.5 System consists of:</p> <ul style="list-style-type: none">• LOQTEQ® Distal Lateral Femur Plate 4.5 (left and right version)• LOQTEQ® Cortical Screw 4.5, T25, self-tapping (locking bone screw)• LOQTEQ® Periprosthetic Screw 4.5, T25, self-tapping (locking bone screw)• Cortical bone screws 4.5 mm, self tapping• Set of Instruments, Distal Lateral Femur Plate 4.5	
Material:	Plates and Screws are made of Ti6Al4V (ASTM F136 or ISO 5832-3)	

Indications:

Buttressing multifragmentary distal femur fractures including: supracondylar, intra-articular and extra-articular condylar, periprosthetic fractures; fractures in normal or osteopenic bone; non-unions and malunions ; and osteotomies of the femur

Substantial Equivalence

The Substantial Equivalence of the new device and the predicate device is based on similar intended use, design, functionality, components and materials in use.

Documentation including mechanical testing to show the substantial equivalence and safety and effectiveness has been provided with this submission.

**Performance Data
(Non-Clinical and /
or Clinical):**

Non-clinical tests have been performed and show the effectiveness and safety of the device.

Summary of Non-clinical tests:

Type of test:

Fatigue implant tests with progressive loadings, representing worst case scenario with respect to clinical use.

Mechanical tests of Periprosthetic Screws acc. to ASTM F543-07

Assessment of test results:

Substantial equivalence with respect to the mechanical performance of the aap system could be stated due to the test results gained. The subject device is safe and effective, and whose performance meets the requirements of its pre-defined acceptance criteria and intended uses.

The Periprosthetic Screws fulfil the relevant requirements of ASTM F543-07 and pre-defined acceptance criteria and intended uses.

Documentation regarding the mechanical testing to show the substantial equivalence and safety and effectiveness has been provided with this submission.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
10903 New Hampshire Avenue
Document Control Center – WO66-G609
Silver Spring, MD 20993-002

Letter Dated: November 19, 2012

aap Implantate AG
% Mr. Marc Seegers
Regulatory Affairs Specialist
Lorenzweg 5
D-12099 Berlin, Germany

Re: K121494

Trade/Device Name: app LOQTEQ® Distal Lateral Femur Plate 4.5 System
Regulation Number: 21 CFR 888.3030
Regulation Name: Single/multiple component metallic bone fixation appliances and accessories
Regulatory Class: Class II
Product Code: HRS, HWC
Dated: October 26, 2012
Received: October 31, 2012

Dear Mr. Seegers:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA).

You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical

device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

Erin I. Keith

Mark N. Melkerson

Director

Division of Orthopedic Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

4. Indications for Use Statement

510(k) Number (if known): K121494

Device Name: LOQTEQ® Distal Lateral Femur Plate 4.5 System

Indications for Use:

The aap LOQTEQ® Distal Lateral Femur Plate 4.5 System include plates for the left and right human femur. The plates accept 4.5 mm locking screws, 4.5 mm cortical screws and 4.5 mm periprosthetic screws. They are intended for:

Buttressing multifragmentary distal femur fractures including: supracondylar, intra-articular and extra-articular condylar, periprosthetic fractures; fractures in normal or osteopenic bone; non-unions and malunions ; and osteotomies of the femur


Prescription Use ☒ X
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)


(Division Sign-Off)
Division of Orthopedic Devices
510(k) Number K121494

Page 1 of 1